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NOTICE OF ALLOWANCE AND FEE(S) DUE

021394

7590

08/18/2004

ARTHROCARE CORPORATION 680 VAQUEROS AVENUE SUNNYVALE, CA 94085-3523 EXAMINER
COHEN, LEE S

PAPER NUMBER

ART UNIT

DATE MAILED: 08/18/2004

APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/082,017	082,017 02/25/2002 Scott A. Ciarrocca		G-4	4438

TITLE OF INVENTION: ELECTROSURGICAL APPARATUS AND METHODS FOR CUTTING TISSUE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	\$300	\$1630	11/18/2004	

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. <u>PROSECUTION ON THE MERITS IS CLOSED</u>. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE REFLECTS A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE APPLIED IN THIS APPLICATION. THE PTOL-85B (OR AN EQUIVALENT) MUST BE RETURNED WITHIN THIS PERIOD EVEN IF NO FEE IS DUE OR THE APPLICATION WILL BE REGARDED AS ABANDONED.

HOW TO REPLY TO THIS NOTICE:

I. Review the SMALL ENTITY status shown above.

If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

A. If the status is the same, pay the TOTAL FEE(S) DUE shown above.

B. If the status above is to be removed, check box 5b on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

A. Pay TOTAL FEE(S) DUE shown above, or

B. If applicant claimed SMALL ENTITY status before, or is now claiming SMALL ENTITY status, check box 5a on Part B - Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and 1/2 the ISSUE FEE shown above.

II. PART B - FEE(S) TRANSMITTAL should be completed and returned to the United States Patent and Trademark Office (USPTO) with your ISSUE FEE and PUBLICATION FEE (if required). Even if the fee(s) have already been paid, Part B - Fee(s) Transmittal should be completed and returned. If you are charging the fee(s) to your deposit account, section "4b" of Part B - Fee(s) Transmittal should be completed and an extra copy of the form should be submitted.

III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

			or <u>Fax</u>	(703) 746-4000	5	
INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected be maintenance fee notification	m should be used for tran respondence including the selow or directed otherwise is.	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBL ders and notificatio) specifying a new	ICATION FEE (if request of maintenance fees correspondence address	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 021394 7590 08/18/2004				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.		
ARTHROCARE CORPORATION 680 VAQUEROS AVENUE SUNNYVALE, CA 94085-3523				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the U States Postal Service with sufficient postage for first class mail in an envi addressed to the Mail Stop ISSUE FEE address above, or being facs transmitted to the USPTO (703) 746-4000, on the date indicated below.		
						(Depositor's name)
						(Signature)
						(Date)
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EXAM	IINER	ART UN	т ј	CLASS-SUBCLASS]	
COHEN	I, LEE S	3739		606-045000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of or agents OR, all (2) the name of registered attorn	f a single firm (having as a member a ney or agent) and the names of up to tent attorneys or agents. If no name is		
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear on I a substitute for fil	the patent. If an assig	nee is identified below, the opening of the opening	document has been filed for
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the patent);	🗆 individual 🚨	corporation or other private g	roup entity
4a. The following fee(s) are	enclosed:	46	. Payment of Fee(s)			
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☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, t			
Advance Order - # 01	Copies		Deposit Account N		(enclose an extra	copy of this form).
 Change in Entity Status a. Applicant claims SM 	(from status indicated above AALL ENTITY status. See 3	•	□ b. Applicant is r	ot claiming SMALL EN	NTITY status. See, e.g., 37 CF	R 1.27(g)(2).
					sly paid issue fee to the applic gistered attorney or agent; or t	
(Authorized Signature)	The second second is the secon	(Date)				
This collection of information	on is required by 37 CFR 1.3	11. The information	on is required to obta	ain or retain a benefit by	the public which is to file (ar minutes to complete, includi comments on the amount of t	nd by the USPTO to process)
submitting the completed ar	oplication form to the USPT	O. Time will vary	depending upon th	e individual case. Any o	comments on the amount of t	ing gamering, preparing, and ime you require to complete

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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•			3739		
			DATE MAILED: 08/18/200	4	

Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 0 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 0 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (703) 305-1383. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at (703) 305-8283.